

### AFFORDABLE HOUSING FUNDING APPLICATION INSTRUCTIONS

Attached is an application for City of Charlotte ("City") funding to support the development of affordable multi-family new construction and/or rehabilitation units. Also attached is a sketch plan application. A completed sketch plan application is required by the Charlotte-Mecklenburg Planning Department.

### **Income Eligibility**

In general, all development projects must benefit households with incomes at or below 80% of the area median income adjusted for family size. Special conditions apply to HOME-assisted rental projects, and to CDBG-assisted nonhousing projects. (See Affordable Housing Loan and Grant Guidelines for income targets)

### **Local Priorities**

The City's housing policy seeks to support the City Council's goal of increasing the supply of affordable and workforce housing, and embraces the national goals established by the U.S. Department of Housing and Urban Development to provide decent and affordable housing; provide suitable living environments; and expand economic opportunities to benefit low and moderate-income households.

The City's housing policy supports the need for safe and decent housing for low and moderate-income households and identifies the following local goals:

- Preserve the existing affordable housing stock;
- Expand the supply of low and moderate-income housing; and
- Support family self-sufficiency initiatives.

**Eligible Applicants** The City's loan/grant programs are developed to serve non-profit and for-profit development entities. Non-profits must have 501 c (3) tax exempt status from the United States Internal Revenue Service.

### **Special Conditions**

Development projects receiving federal funding must comply with Federal regulations for: environmental review, "Davis Bacon" wage rates, real property acquisition, Uniform Relocation Act (URA), contract procurement, lead based paint, and (for large projects) HUD Section 3 economic opportunity initiatives. In adherence to Federal regulations, funding cannot be provided for development projects that start prior to a funding commitment from the City of Charlotte.

**Invalid Applications** Applications may be rejected without evaluation for *all or one* of the following reasons:

- 1) Program not clearly eligible according to local or federal guidelines.
- 2) Applicant has demonstrated poor past performance in carrying out City-funded programs or complying with Federal regulations.
- 3) Submission of an incomplete application.
- 4) Noncompliance with Loan and Grant Guidelines, and City housing policies.

### **Project Evaluation**

Applications must be complete and will be evaluated based on the priorities established by the City, the criteria established in the Loan and Grant Guidelines, and if applicable the Request for Proposal documents.

| Do Not Submit This Page |
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# **Affordable Housing Funding Application**

| Cit | City Funding Sources:  Local Funds (including Housing T CDBG (Community Development HOME – Federal Funds OTHER – To be determined by the available funding, or other funds the Project | Block Grant) – Federal Funds   |
|-----|--|--|
| I.  | I. APPLICANT INFORMATION   |  |
|     | Full Legal Name of Applicant:  |  |
|     | Applying as: Non-Profit or Government Agency   |  |
|     | (Check one) For-Profit Organization  |  |
|     | Address:   |  |
|     | City/State/Zip:  |  |
|     | Contact Person:  |  |
|     |  | mber:  |
|     |  |  |
|     | Name of Development:   |  |
|     | Development Type:  |  |
|     | Number of Units:   |  |
|     | City Funding Request: \$   |  |
|     | To the best of my knowledge and belief all information in and submission of the application has been approved by the   | this application is true and current<br>he appropriate applicant authorities |
|     | Signature  |  |
|     | President/Board Chair  | Date   |

### II. DEVELOPMENT DESCRIPTION

| Development Name:                          |               |
|--|---------------|
| Development Street Address:                |               |
| Neighborhood:                              | Census Tract: |
| III. TYPE OF ACTIVITY (check applicable ac | ctivity)      |
| Multi-Family Rental – New Construction     |               |
| Multi-Family Rental - Rehabilitation       |               |
| Supportive Housing                         |               |
| Single Room Occupancy (SRO)                |               |

## IV. INCOME LEVELS AND SPECIAL NEEDS

Please complete the following tables to the best of your ability. Show actual or estimated number of units for the development occupants/beneficiaries, **not percentages**.

| Income Group                            | <b>Number of Units</b> |
|---|------------------------|
| 30% or less of area median income (AMI) |                        |
| 31-50% of AMI                           |                        |
| 51-60% of AMI                           |                        |
| 61-80% of AMI                           |                        |
| >80% of AMI                             |                        |
| TOTAL                                   |                        |

# **Supportive Housing Eligible Population (if applicable)**

| Category               | <b>Number of Units</b> |
|------------------------|------------------------|
| Elderly (over 60)      |                        |
| Disabled (not elderly) |                        |
| Homeless               |                        |
| People with HIV/AIDS   |                        |
| Veterans               |                        |
| Other – Identify       |                        |
| TOTAL                  |                        |

| V.               | TYPE OF FUNDING REQUESTED:  |             |                   |
|------------------|---|-------------|-------------------|
| Туре             | e of City funding (check one): Grant Loan   |             |                   |
| VI.              | APPLICANT DESCRIPTION   |             |                   |
| Pleas            | se provide the following information for the organization that will actually  | carry ou    | t the project.    |
| <b>A.</b> (      | COMPANY/ORGANAIZATION   |             |                   |
| 1.               | What is your Company/organization's mission statement?  |             |                   |
| 2.               | Incorporation date (Month and Year)?  |             |                   |
| 3.               | Estimated Budget for Current Fiscal Year: \$  |             |                   |
| 4.               | Number of staff employed (full time equivalents):   |             |                   |
| 5.               | Years of affordable housing development experience:   |             |                   |
| В. 1             | DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST   |             |                   |
|                  | there any officers or employees of the agency/company or members of the business associates, who will be involved with conducting this project:   | ir immed    | iate families, or |
| a) Er            | mployees of, or closely related to employees of, the City of Charlotte?   | YES         | NO                |
| b) M             | Iembers of, or closely related to Members of, the Charlotte City Council?   | YES         | NO                |
|                  | eneficiaries of the program for which funds are requested, either as clients as paid providers of goods or services?  | YES         | NO                |
| exist<br>but the | but have answered <b>YES</b> to any question, <b>please attach a full explanation to</b> tence of a potential conflict of interest does not necessarily make the project the existence of an <b>undisclosed</b> conflict may result in the termination of an dosure statement must be signed and dated. | ct ineligit | ole for funding,  |

# MULTI-FAMILY SKETCH PLAN APPLICATION CITY OF CHARLOTTE-PLANNING DEPARTMENT

No processing or review of a sketch plan will proceed without the following information. This sketch plan review does not replace the formal Subdivision sketch plan review.

| Name of Project:  |   |
|---|---|
| Property Address:   |   |
| Tax Parcel Number(s):   |   |
| Zoning:   | Rezoning Petition #:  |
|   | (If applicable)   |
| Total Acreage:  | # of Lots Proposed:   |
| # of Unita Dronogod   | (If applicable)   |
| # of Units Proposed: (If applicable)  | Type:(Apts. Condo, Townhouse)   |
| ,   |   |
| Owner Address:  |   |
| Architect:  | Phone Number: _(  |
| Address:  | E-Mail Address: ()  |
| Contact for Project:  | Phone Number:   |
|   | E-Mail Address:   |
| Required Pre-Submittal Meeting* with:   | Date of Meeting   |
| (*Sketch plan applications will not be reviewed un<br>Brent Wilkinson at (704)336-8329 or bwilkinson# | ntil a required pre-submittal meeting with planning staff is held.) Con #@charlottenc.gov to schedule a meeting |

### **Submission Requirements:**

- A. All Building Elevations
- B. Submit all Building Elevations (including materials and total height)
- C. The Plan must have a scale less than or equal to 1"=100'. The following items MUST be provided on the sketch plan:
  - Vicinity map
  - Survey of the property proposed for development
  - Improvements (building, streets, driveways, buffers, etc.)
  - Existing easements located on the property
  - Existing right-of-way width and location of centerline
  - The locations of all property lines which intersect the property boundaries
  - Adjacent properties zoning and current use (used to determine buffer requirements)
  - Proposed area for detention if applicable
  - Any existing driveways adjacent to site
  - All creeks located within close proximity to the site
  - Tree save areas indicated
  - Water quality buffers & floodplain (SWIM, Watershed and PCCO)